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| | Application Number | 10/603,285 |
| TRANSMITTAL FORM | Filing Date | 8/11/2064 |
| | First Named Inventor | MICHAEL E. SHANAHAN |
| | Art Unit | 2618 |
| (to be used for all correspondence after initial filin | Examiner Name | tuan Horng NguyEN |
| | Attorney Docket Number | 44- (|

| (to be used for all correspondence after initial filing) | | | | | N HORAG NGUYEN | | | | |
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| Tot | al Number o | of Pages In This Submission | 35 | 35 Attorney Docket Number | | MES/002 CON IT RCE | | | |
| | ENCLOSURES (Check all that apply) | | | | | | | | |
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| Amendment/Reply After Final Aftidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ | | | Remail D Fc. | Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks D Fact Tonsmark Salts Letter Other Enclosure(s) (please Identification below): [Appeal Notice, Brief, Repty Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identification) CD, Number of CD(s) [Appeal Notice, Brief, Repty Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identification) CD, Number of CD(s) [Appeal Notice, Brief, Repty Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identification) CD, Number of CD(s) [Appeal Notice, Brief, Repty Brief) | | | | | |
| | Reply to Missing Parts incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 2) Period for 20 38 (df 825.00) 3) CC Paymed for 20 38 (df 825.00) 4) Notice of AppleAC (w/fec) (270.00) 5) Reply 29 Pageo. | | | | | | | | |
| | | SIGNA | TURE C | OF APPLICANT, ATTO | DRNEY, | OR AGENT | | | |
| Firm Name KAUGKU: ASSOCIATES, LLC Signature | | | | | | | | | |
| Printed name SCOTT H. WAL-KO | | | | | | | | | |
| Date 6/18/09 Reg. No. 45,786 | | | | | | 45,786 | | | |
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Date 6/18/09

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Approved for use through 06/30/2010, OMB 0651-0032
U.S. Patent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMS control number Effective on 12/08/2004 Complete if Known ees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). Application Number 10*1603,28*5 FEE TRANSM Filing Date 7004 For FY 2009 First Named Inventor Michael E. SHANAHAM Examiner Name 1toang て以みべ Applicant claims small entity status. See 37 CFR 1.27 Art Unit **સદા**ક્ષ TOTAL AMOUNT OF PAYMENT (\$) 825.0<u>0</u> Attorney Docket No. MEG/OOD CONIL RLE METHOD OF PAYMENT (check all that apply) Credit Card Money Order None Other (please identify); Deposit Account Deposit Account Number. Deposit Account Namo For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1,17 WARNING: Information on this form may become public, Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity** Small Entity Application Type Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 330 165 540 270 220 110 Design 220 110 [00] 50 140 70 Plant 220 110 330 165 170 85 330 Reissue 165 540 270 650 325 **Provisional** 220 ٥ 110 O 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissucs) 52 26 Each independent claim over 3 (including Reissucs) 220 110 Multiple dependent claims 390 195 Multiple Dependent Claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Pald (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) / 50 = (round up to a whole number) 4. OTHER FEE(S) Fees Pald (\$) Non-English Specification, \$130 fee (no small entity discount) 555.00 270.00 Other (e.g., late filing surcharge): (XTCASION) of Time 3 mo Notice of

| SUBMITTED BY | | | | |
|-----------------------------|-------|-----------|-------------------------|--|
| Signature | | | Registration No. 45,786 | Telephone 201-962-3570 |
| Name (Print/Type) | \$507 | H. KALTKU | | Date 6/18/09. |
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This collection of Information is required by 37 CFR 1,138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-08)
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Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid QMB control number Effective on 12/08/2004 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number Filing Date For FY 2009 First Named Inventor MICHAEL E. SHANAHAN Examiner Name Applicant claims small entity status. See 37 CFR 1.27 UAN ነተ ዕፍለ q Art Unit TOTAL AMOUNT OF PAYMENT 825.00 Attorney Docket No. 1002 METHOD OF PAYMENT (check all that apply) Check [] Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number, Deposit Account Name For the above-Identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) Indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity Small Entity <u>Application Type</u> Fee (\$) Fee (\$) Fee (\$) Fee (\$) Eee_(\$) Fees Paid (\$) Feg_(\$) Utility 330 165 540 220 110 Design 220 110 100 140 50 70 Plant 220 110 330 165 170 85 Reissue 330 165 540 270 650 325 **Provisional** 220 110 O 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 220 110 Multiple dependent claims 390 195 <u>Total Claims</u> Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims - 20 or HP = Fep (\$) Fee Pald (\$) HP = highest number of total claims paid for, if greater than 20. Indep, Claims Extra Cighns Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Total Sheets Fee Paid (\$) (round up to a whole number) 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 555.00 Other (e.g., late filing surcharge): Extension of Time 3 mo NOTICE OF APPEAC 70.00 SUBMITTED BY Registration No. Signature Telephone (Attorney/Agent)

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